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CONFIRMATION NO. 3117

<b>SERIAL NUMBER</b> 10/801,783	<b>FILING OR 371(c) DATE</b> 03/16/2004 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3739	<b>ATTORNEY DOCKET NO.</b> 1004.012
<b>APPLICANTS</b> Victor I. Chornenky, Minnetonka, MN; Ali Jaafar, Eden Prairie, MN;  <b>** CONTINUING DATA *****</b> <i>AT</i> This appln claims benefit of 60/454,672 03/17/2003 <b>** FOREIGN APPLICATIONS *****</b> <i>AT</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 06/02/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Ali Jaafar</i> Acknowledged <i>AT</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 19
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> Law Offices P.O. Box 386353 Bloomington, MN55438				
<b>TITLE</b> Apparatus and method for hair removal by electroporation				
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	